



\$3(S)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Unit : 3751
Examiner : Amanda R. Flynn
Serial No. : 09/839,643
Filed : April 20, 2001
Inventors : Gad Keren
 Randy Kesten
Title : METHODS AND
 APPARATUS FOR
 REDUCING LOCALIZED
 CIRCULATORY SYSTEM
 PRESSURE



22469

PATENT TRADEMARK OFFICE

Docket: 12191-01

Confirmation No.: 2139

Dated: November 12, 2002

Commissioner for Patents
Washington, DC 20231

Sir:

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Certificate of Mailing Under 37 CFR 1.8 NOV 26 2002
TECHNOLOGY CENTER R3700

For

Postcard
Amendment Transmittal Letter, in duplicate
Amendment

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the Commissioner for Patents, Washington, DC 20231, on the date appearing below.

Name of Applicant, Assignee, Applicant's Attorney
or Registered Representative:

Schnader Harrison Segal & Lewis
Customer No. 022469

By: _____

Date: _____

November 12, 2002



Attorney Docket No.: 1291-01

In re Application of Gad Keren et al

Serial No.: 09/839,643

Filed: April 20, 2001

For: METHODS AND APPARATUS FOR REDUCING LOCALIZED CIRCULATORY SYSTEM PRESSURE

COMMISSIONER FOR PATENTS
Washington, DC 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Small entity status of this application under 37 CFR §1.9 and §1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PRE- VIOUSLY PAID FOR	PRESENT EXTRA
TOTAL 20	- ** 20 =	0
INDEP. 4		
- *** 3 =		
First presentation of multiple dependent claim		

SMALL ENTITY

RATE	ADD'L FEE
x 9=	\$
x42=	\$42
+140=	\$

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OTHER THAN
SMALL ENTITY

RATE	ADD'L FEE
x18=	\$
x84=	\$
+280=	\$

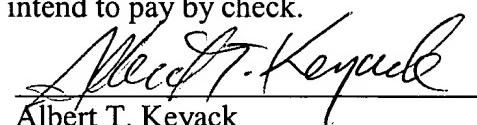
OR

TOTAL ADDITIONAL FEE \$42 OR \$0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 13-3405 in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.
- A check in the amount of \$42.00 is attached.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-3405. A duplicate copy of this sheet is enclosed.
- Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
- Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.



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